

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	T-G		
O.I.P.E. CLASSIFIER	T		
FORMALITY REVIEW	HL	1079	5/1 5/2 06/21/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	
Original	11 06 25 06 02 08 03 08
1	✓
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50	✓

Claim	Date
Final	
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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